



Pelican State Outpatient Center

1525 Dickory Avenue
Harahan, Louisiana 70123
Mon. - Fri. 8am - 11pm
Sat. - Sun. 9am - 5pm

Office 504.818.0006

Fax 504.818.0095

www.PelicanStateOutpatient.com

"AUTHORIZATION-TO-TREAT" FORM

(Send with Employee or Fax to Clinic)

Employee's Name	Social Sec. #	Today's Date
Company's Name	Injury Date & Time	AM PM
Signature of Person Authorizing Treatment (Mandatory)		Ph # of Authorizing Person
Name of Workers' Comp Insurance Carrier/Debtor		Treatment Date

EMPLOYER IS RESPONSIBLE FOR SERVICES RENDERED

REASON FOR VISIT

- | | |
|---|---|
| <input type="checkbox"/> Nurse's Health Assessment | <input type="checkbox"/> Respirator Fit Test |
| <input type="checkbox"/> Pre-placement Physical | <input type="checkbox"/> Respirator Clearance Exam with PFT |
| <input type="checkbox"/> Non-DOT Physical | <input type="checkbox"/> OSHA / Medical Surveillance |
| <input type="checkbox"/> DOT Physical | <input type="checkbox"/> Oil & Gas UK |
| <input type="checkbox"/> Coast Guard Physical | <input type="checkbox"/> Crane Operator Physical |
| <input type="checkbox"/> Immunization, Flu Shot, etc. | <input type="checkbox"/> Overseas/Travel Physicals & Vaccines |
| <input type="checkbox"/> Audiogram | <input type="checkbox"/> Treatment Only |
| <input type="checkbox"/> Workers' Comp. Injury | |

OTHER TESTING INFORMATION

DRUG SCREENING: (Check All Boxes That Apply)

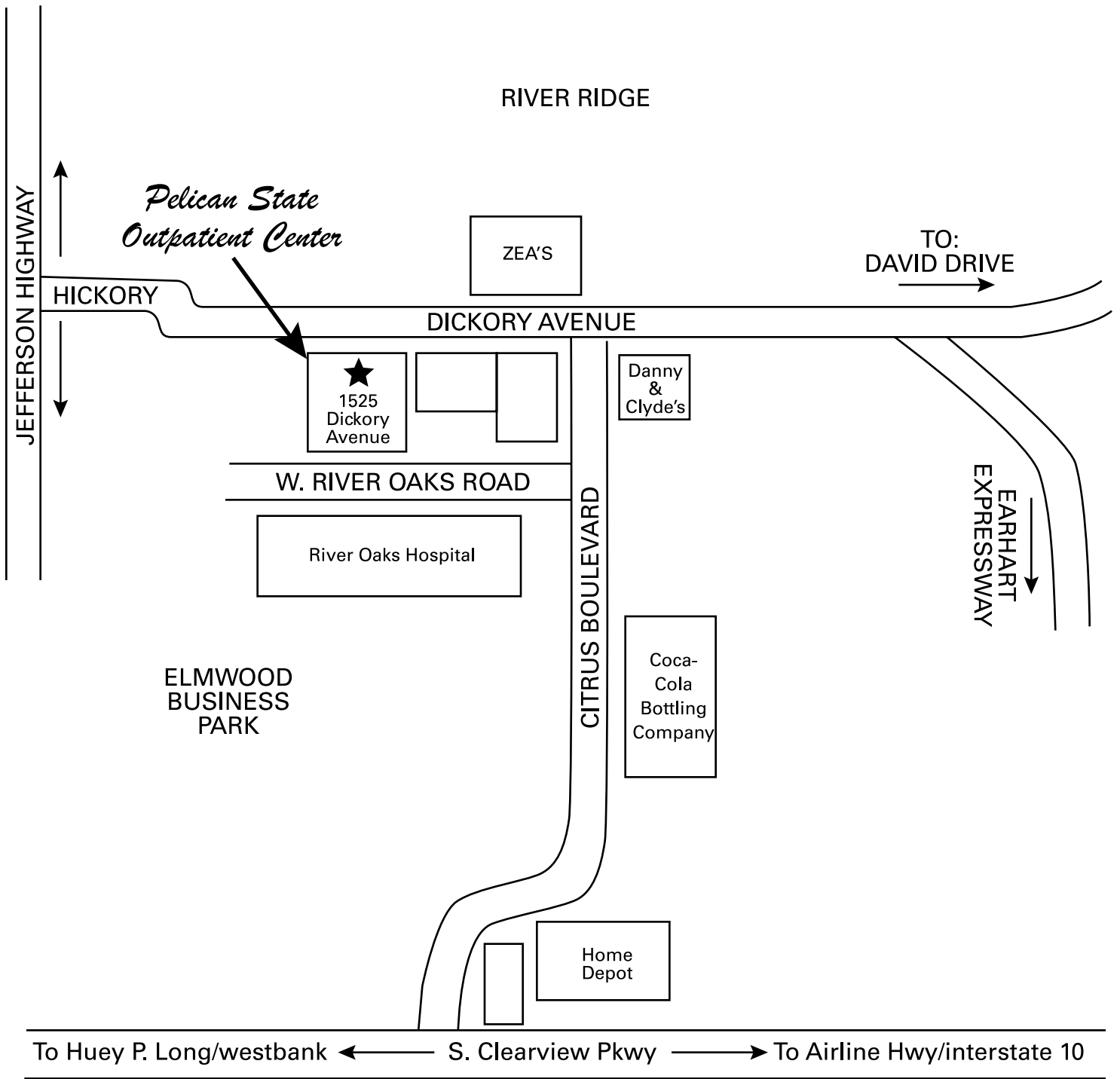
- | | |
|--|--|
| <input type="checkbox"/> Non-DOT Urine Drug Screen | <input type="checkbox"/> Rapid Drug Screen |
| <input type="checkbox"/> DOT Urine Drug Screen | <input type="checkbox"/> Saliva Test for Alcohol |
| <input type="checkbox"/> Breath Alcohol Test (EBT) | <input type="checkbox"/> Hair Analysis |
| <input type="checkbox"/> NON-DOT | <input type="checkbox"/> Collection Only |
| <input type="checkbox"/> DOT | |

REASON

- | |
|--|
| <input type="checkbox"/> Pre-Employment |
| <input type="checkbox"/> Periodic |
| <input type="checkbox"/> Random |
| <input type="checkbox"/> For Cause / Suspicion |
| <input type="checkbox"/> Post Accident |

EMERGENCY INSTRUCTIONS 24 HOURS

- Life or Limb-Threatening Injuries - Dial 911
- Non-Life or Non-Limb-Threatening Injuries - Dial (504) 818-0006
- Follow-up care for an injury - Dial (504) 818-0006 for appointment



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